

Nursing Care Quality Assurance Commission

Attached is an Advisory Opinion Request form in response to your inquiry concerning:

Please complete and return five (5) copies of all materials to this office by e-mail.

The following criteria will be used when reviewing the question and in making a recommendation to the Nursing Commission:

1. Safe for the consumer
2. Best interest of the public
3. Safe for the practitioner
4. Part of the nursing process
5. Current trends and national standards
6. Literature review
7. Procedures standardized
8. Mechanisms to maintain competence
9. Impact on Washington
10. Scope of practice affected (ARNP, CRNA, RN, LPN, CNA)
11. Consistent with previous opinions
12. Determination of independent, interdependent or dependent action

Complete and well-documented requests expedite the response time, however, the decision process may take up to six months.

For additional information or questions about the process, please contact Mike Kramer at the Nursing Commission office at (360) 236-4724.

Please e-mail your request to: Chuck.Cumiskey@doh.wa.gov

Hard copies and supporting documents can be mailed to the following address:

Washington State
Nursing Care Quality
Assurance Commission
PO Box 47864
Olympia, WA 98504-7864

Advisory Opinion Request Form

1. Opinion request (state clearly the facts involved and the question to which the Commission is requested to replay):

2. Practice Area: _____

3. Requesting agency or professional body: _____

4. Name of the person in agency or profession body requesting the opinion. Include title, phone number, address and e-mail address:

5. Provide the following supporting documents:

- a. Rationale supporting the request
- b. Literature review
- c. Standardized procedures
- d. Identification of availability of learning resources
- e. Positive and negative implications of requested practice
- f. Fiscal impact (on industry, nurses, consumers)
- g. Manpower impact (increase/decrease in number of people to provide service)